

1201 Carmichael Way • Montgomery, Alabama 36106
Telephone: 334.242.5544 • Fax: 334.270.9118
arec.alabama.gov

Salesperson Prelicense Evaluation

For individuals who do not currently hold an Alabama license

Name: _____

Date Course Started: _____ Date Course Ended: _____

School: _____ Instructor: _____

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- | | |
|-------------------------------------------------------------------------------|----------------------------------------------------------|
| 1. Was the instructor knowledgeable in the subject matter? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Was the instructor prepared with an organized presentation? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Did the instructor encourage student feedback and participation? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Were you provided with sufficient handouts/course materials? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Did any cell phones, beepers or pagers go off during class? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Did the class meet for the full time? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Do you feel that the class prepared you for the state exam? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Did you find the AMP test center conducive for test taking? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Were you well informed of the site policies and operation of the computer? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. What did you like most/least about the class? | _____ |
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Provide additional explanation for answers above and/or any other comments regarding the course or licensing exam. Use back if needed. _____

MAIL, EMAIL, OR FAX COMPLETED FORM TO:
Alabama Real Estate Commission
1201 Carmichael Way, Montgomery, AL 36106
Fax: 334.270.9118
education@arec.alabama.gov